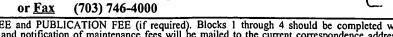
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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7590

12/11/2003

Colin P. Abrahams Suite 400 5850 Canoga Avenue Woodland Hills, CA 91367



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Cølin P. Abrahams	(Depositor's na
Coorseran	(Signat
February 11, 2004	(D

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/084,272	02/27/2002	Monita Liu	1150-102.US	7119

TITLE OF INVENTION: ELECTRICALLY ILLUMINATED FLAME SIMULATOR

APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665		\$300	\$965	03/11/2004
EXAM	MINER .	ART UN	IT	CLASS-SUBCLASS]	
ALAV	VI, ALI	2875	•	362-392000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		names of agents O firm (hav agent) ar	inting on the patent front page, f up to 3 registered patent a R, alternatively, (2) the name ring as a member a registered and the names of up to 2 registor agents. If no name is listerinted.	of a single attorney or 2	n P. Abrahams	
3. ASSIGNEE NAME ANI	O RESIDENCE DATA TO B	E PRINTED ON T	HE PATEN	T (print or type)		

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A check in the amount of the fee(s) is enclosed.					
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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)	Δ	(Date)	
Colin P. Abrahams	Oldkars	Feb 11, 2004	
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